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REISSUE APPLICATION DECLARATION BY THE INVENTOR

Docket Number (Optional)

As a below named inventor, I hereby declare that:

My residence, mailing address and citizenship are stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed

in patent number 6,015,425, granted January 18, 2000, and for which a

reissue patent is sought on the invention entitled NASAL AIR FRESHENER FOR DENTAL PATIENTS

the specification of which

☒ is attached hereto.

☐ was filed on _____ as reissue application number _____/_____
and was amended on _____.
(If applicable)

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

☒ by reason of a defective specification or drawing.

☒ by reason of the patentee claiming more or less than he had the right to claim in the patent.

☐ by reason of other errors.

At least one error upon which reissue is based is described below. If the reissue is a broadening reissue, such must be stated with an explanation as to the nature of the broadening:

The specification notes at column 3, lines 23-29 that the intra-nasal clip can be used for persons other than dental patients, as noted in the preamble of the Claims of the issued patent. For example, the intra-nasal clip can be used for persons exposed to foul odors in the work environment, such as at crime scene investigators, autopsies, sewage systems and hazardous occupational environments.

Applicant also amends Claim 7 to make it dependent upon Claim 1.

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(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)

Docket Number (Optional)

All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the United States Patent and Trademark Office connected therewith.

Name(s)

Registration Number

Alfred M. Walker 29,983

Correspondence Address: Direct all communications about the application to:

☒ Customer Number

Type Customer Number here

Place Customer Number Bar
Code Label here
04988

☐ Firm or
Individual Name

PATENT TRADEMARK OFFICE

Address

Address

City

State

Zip

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.

Full name of sole or first inventor (given name, family name)

James Altadonna, Jr.

Inventor's signature

Date

November 30, 2001

Residence 203 Whitewood Drive
Massapequa, NY 11762

Citizenship USA

Mailing Address 203 Whitewood Drive, Massapequa, NY 11762

Full name of second joint inventor (given name, family name)

Inventor's signature

Date

Residence

Citizenship

Mailing Address

Full name of third joint inventor (given name, family name)

Inventor's signature

Date

Residence

Citizenship

Mailing Address

☐ Additional joint inventors are named on separately numbered sheets attached hereto.

FOOTNOTES

Please type a plus sign (+) inside this box → ☐

PTO/SB/51S (02-01)
Approved for use through 01/31/2004. OMB 0651-0033
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**SUPPLEMENTAL DECLARATION
FOR REISSUE
PATENT APPLICATION
TO CORRECT "ERRORS" STATEMENT
(37 CFR 1.175)**

Attorney Docket Number	
First Named Inventor	James Altadonna, Jr.
COMPLETE	
Application Number	/
Filing Date	
Group Art Unit	
Examiner Name	

I/We hereby declare that:

Every error in the patent which was corrected in the present reissue application, and which is not covered by the prior oath(s) and/or declaration(s) submitted in this application, arose without any deceptive intention on the part of the applicant.

I/We hereby declare that all statements made herein of my/our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
James		Altadonna, Jr.	
Inventor's Signature		Date	Nov 30 2001
Name of Second Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Name of Third Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Name of Fourth Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	

☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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